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CONFIRMATION NO. 5896

<b>SERIAL NUMBER</b> 10/808,772	<b>FILING OR 371(c) DATE</b> 03/25/2004 <b>RULE</b>	<b>CLASS</b> 700	<b>GROUP ART UNIT</b> 2121	<b>ATTORNEY DOCKET NO.</b> 03AB123 (110003.00074)
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/737,384 12/16/2003 which claims benefit of 60/433,892 12/16/2002

yes (TP)

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

None (TP)

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

06/07/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 35	<b>INDEPENDENT CLAIMS</b> 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: _____			

**ADDRESS**

63122

**TITLE**

Controller with agent functionality

<b>FILING FEE RECEIVED</b> 1212	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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